Promotion of ISM

†2257. SHRI KRIPAL PARMAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have formulated any scheme for promotion of Indian Systems of Medicine in the country;

(b) if so, the details thereof; and

(c) the percentage of amount being spent by Government for the same?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) In order to promote the Indian Systems of Medicine & Homoeopathy, the Government in 1995 established an independent Department of ISM&H in the Ministry of Health and Family Welfare. The Department of ISM&H has already implemented schemes for the development and cultivation of medicinal plants, preparation of agrotechniques, upgradation of undergraduate/postgraduate institutions, standardisation of drugs, encouraging intra-mural & extra mural research and dissemination of information through information, education and communication (IEC).

(c) The budget allocation of ISM&H Plan & Non-Plan for the year 2002-2003 is Rs. 200.86 crores which is 2.27% of the total budget allocation for the Ministry of Health and Family Welfare.

Use of ISM

†2258. SHRI KRIPAL PARMAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that there is again a need to bring in practice the Indian Systems of Medicine and health care;

(b) if so, the details thereof; and

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†Original notice of the question was received in Hindi.

(c) the details of the various diseases for which cure or prevention is not possible through Allopathy System of Medicine?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) The Indian System of Medicine and Homoeopathy are already contributing in the delivery of health care I the country. A number of measures have been taken to make use of the ISM&H practitioners and the strength of Indian Systems of Medicine in a more significant manner.

- A high power advisory group has been set up under the Population Commission to mainstream the Indian Systems of Medicine and Homoeopathy for population stabilization.
- Ayurvedic and Unani medicines have been included in the Reproductive and Child Health Programme.
- The outcome of the research done over the last 20 years has been studied to decide upon areas where the systems have a definite strength which can be used to advantage for complementing the present medical and public health approach.
- All States, Ministries and Departments of the Government have been encouraged to give opportunities to the employees to avail of ISM treatment on the lines of the Central Government Health Scheme (CGHS) which offers ISM & H treatment.
- Through Confederation of Indian Industry (CII), industry has been encouraged to set up at least one dispensary of Indian System, namely Ayurveda, Unani, Homoeopathy in each industry.
- The concept of starting Specially Clinics for certain effective therapies of ISM in the general hospitals for providing comprehensive care as well as greater choice of treatment has been recommended to the State Governments with particular reference to the use of the Panchakarma and Kshar-Sutra Therapies.

► A number of proposals have been made for implementation during 10 Plan for expending outreach of ISM&H.

(c) No such analysis has been done. However, a number of Chronic and life style related diseases are stated to have no cure.

Prevalence of arsenic contamination of drinking water in Indo-Bangladesh Region

2259. DR. ALLADI P. RAJKUMAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether WHO has warned India of wide prevalence of arsenic contamination of drinking water in Indo-Bangladesh region;

(b) the name of the districts and number of people estimated to be running the risk of arsenic poisoning in West Bengal and the number of cases actually detected; and

(c) the steps taken to fight the menace?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. C.P. THAKUR): (a) In 1997, WHO acknowledged that arsenic in drinking water was a 'major public health issue' and recommended to the government of India and Bangaladesh to develop measures to tackle presence of arsenic in drinking water supplies in India and Bangaladesh.

(b) The problem of arsenic contamination of drinking water is mainly restricted to geographical areas of West Bengal. Eight districts *viz.* 24 Pargans (North & South), Nadia, Murshidabad, Malda, Howrah, Hoogly and Burdwan have been affected. As per reports of All India Institute of Hygiene & Public Health, Kolkata, 5.31 million people have clinical symptoms of arsenic posing including hyper pigmentation, kerotosis & hepatomegaly.

(c) The Government of West Bengal in collaboration with and financial support from Government of India (Rajiv Gandhi Drinking Water Mission) has taken steps for supplying safe drinking water from alternate sources in the affected areas. Piped water supply schemes with surface water as source and digging of Deep-tubewells